FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) ÇLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. ı, t TOTAL TOTAL TOTAL DEP. TOTAL DEP. ECATAL: ISIAP?

PTO-1350 (3-78)